Fill in this information to identify yo		
United States Bankruptcy Court for the: CENTRAL DIST. OF CALIFORNIA		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this amended fili

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

F	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your	Michael	
	government-issued picture identification (for example,	First Name	First Name
	your driver's license or	Scott	
	passport).	Middle Name	Middle Name
		Patterson	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or maiden names.	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of	xxx - xx - 3 2 4 6	xxx - xx -
	your Social Security number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx	9xx - xx

(ITIN)

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Debtor 1 Michael Scott Pat		Michael Scott Patt	erson	Case number (if known)		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	and Em		✓ I have not used any business names or E	Ns.		
	(EIN) y	cation Numbers ou have used in t 8 years	Business name	Business name		
		trade names and	Business name	Business name		
	doing b	business as names	Business name	Business name		
			EIN	EIN — — — — — — — —		
5.	Where	you live		If Debtor 2 lives at a different address:		
			17740 Bessemer Street Number Street	Number Street		
			Encino CA 91316			
			City State ZIP Code	City State ZIP Code		
			Los Angeles County	County		
			If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
			Number Street	Number Street		
			P.O. Box	P.O. Box		
			City State ZIP Code	City State ZIP Code		
6.		ou are choosing	Check one:	Check one:		
	tnis dis bankru	etrict to file for ptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
			☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		
F	art 2:	Tell the Court A	about Your Bankruptcy Case			
7.	Bankru	apter of the	Check one: (For a brief description of each, see for Bankruptcy (Form 2010)). Also, go to the top	Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.		
	are cho under	osing to file	Chapter 7			
			Chapter 11			
			Chapter 12			
			Chapter 13			

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Deb	tor 1 Michael Scott P	atterson		_ Case number (if know	n)
8.	How you will pay the fee		will pay the entire fee when I file my court for more details about how you may be ay with cash, cashier's check, or mone behalf, your attorney may pay with a cre	ay pay. Typically, if you are ey order. If your attorney is	paying the fee yourself, you may submitting your payment on your
			need to pay the fee in installments. ndividuals to Pay The Filing Fee in Inst	-	
		L t	request that my fee be waived (You By law, a judge may, but is not required than 150% of the official poverty line the ee in installments). If you choose this filing Fee Waived (Official Form 103B)	I to, waive your fee, and may at applies to your family size option, you must fill out the	y do so only if your income is less and you are unable to pay the Application to Have the Chapter 7
9.	Have you filed for	☑ ¹	No		
	bankruptcy within the last 8 years?		es.		
		Distri	et	When MM/DD/YY	Case number
		Distri	et	When	Case number
		Distri	ot		Case number
10.	Are any bankruptcy	☑ ¹	No		
	cases pending or being filed by a spouse who is		∕es.		
	not filing this case with you, or by a business	Debto	ır	Relation	nship to you
	partner, or by an	Distri	et	When	Case number,
	affiliate?			MM / DD / YY	YY if known
		Debto	ır	Relation	nship to you
		Distri	et	When	Case number,
				MM / DD / YY	YY if known
11.	Do you rent your residence?		No. Go to line 12. Yes. Has your landlord obtained an ev	viction judgment against you	?
			No. Go to line 12.Yes. Fill out Initial Stateme and file it as part of this ban	•	ent Against You (Form 101A)

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Debtor 1 Michael Scott Patte		Patterson	rson Case number (if known)					
Pa	art 3: Report Abo	ut Any B	usine	sses You Own as a	a Sole Proprietor			
12.	Are you a sole propriet of any full- or part-time business?	or 🗹		Go to Part 4. Name and location of b	usiness			
	A sole proprietorship is a business you operate as individual, and is not a separate legal entity such	an h as		Name of business, if any Number Street				
	a corporation, partnership LLC.	p, or						
	If you have more than or sole proprietorship, use a separate sheet and attack	a		City Check the appropriate	box to describe your busines	State	ZIP Co	de
	to this petition.			Health Care Busin Single Asset Real Stockbroker (as d	ness (as defined in 11 U.S.C I Estate (as defined in 11 U.S defined in 11 U.S.C. § 101(53 er (as defined in 11 U.S.C. §	. § 101(27A)) S.C. § 101(51B) SA)))	
13.	Chapter 11 of the can set a Bankruptcy Code and most red are you a small business or if any			filing under Chapter 11, the court must know whether you are a small business debtor so that it oppropriate deadlines. If you indicate that you are a small business debtor, you must attach your ent balance sheet, statement of operations, cash-flow statement, and federal income tax return of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).				
	debtor?		No.	I am not filing under Ch	hapter 11.			
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chapt the Bankruptcy Code.	ter 11, but I am NOT a small	business debto	r accordin	g to the definition in
			Yes.		ter 11, I am a small business I do not choose to proceed u		-	
			Yes.	•	ter 11, I am a small business I choose to proceed under S		•	
Pa	Report If Yo	ou Own o	r Hav	e Any Hazardous F	Property or Any Prope	rty That Nee	ds Imm	ediate Attention
14.	Do you own or have an property that poses or alleged to pose a threat imminent and identifiable hazard to public health	is of ole	No Yes.	What is the hazard?				
	safety? Or do you own any property that needs immediate attention?			If immediate attention i	is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fee a building that needs urg	d, or		Where is the property?	Number Street			
	repairs?							
					City		State	ZIP Code

Deb	otor 1 Michael Sc	ott Patterson	Case number (if known)				
Р	art 5: Explain	Your Efforts to Re	ceive a Briefing About Credi	it Co	ounseling		
15.	Tell the court whether you have received a	About Debtor 1: You must check one	: fing from an approved credit	Yo	ou must check one	ouse Only in a Joint Case): : fing from an approved credit	
(briefing about credit counseling.	counseling ager	ncy within the 180 days before I ptcy petition, and I received a		counseling ager filed this bankru certificate of cor	ncy within the 180 days before I uptcy petition, and I received a	
	The law requires		the certificate and the payment you developed with the agency.			the certificate and the payment you developed with the agency.	
	that you receive a briefing about credit counseling before you file for bankruptcy. You	counseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have ompletion.	□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.			
	must truthfully check one of the following choices.	•	ter you file this bankruptcy petition, copy of the certificate and payment			iter you file this bankruptcy petition, copy of the certificate and payment	
If you to to the disappoor who you cre	If you cannot do so, you are not eligible to file. If you file anyway, the court can dismiss your case,	services from ar unable to obtain days after I mad	ked for credit counseling n approved agency, but was those services during the 7 e my request, and exigent nerit a 30-day temporary quirement.		☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		
	you will lose whatever filing fee you paid, and your creditors can begin collection activities again.	requirement, atta efforts you made were unable to ob	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you otain it before you filed for what exigent circumstances e this case.	sheet explaining what requirement, attach a separate sheet of the briefing, why you efforts you made to obtain the briefing you filed for were unable to obtain it before you file		ch a separate sheet explaining wha to obtain the briefing, why you otain it before you filed for what exigent circumstances	
		dissatisfied with y	e dismissed if the court is your reasons for not receiving a ou filed for bankruptcy.		dissatisfied with y	e dismissed if the court is your reasons for not receiving a ou filed for bankruptcy.	
		still receive a brie You must file a co along with a copy	sfied with your reasons, you must fing within 30 days after you file. ertificate from the approved agency, of the payment plan you. If you do not do so, your case d.		If the court is satisfied with your reasons, you still receive a briefing within 30 days after you You must file a certificate from the approved a along with a copy of the payment plan you developed, if any. If you do not do so, your camay be dismissed.		
		for cause and is I	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.			the 30-day deadline is granted only imited to a maximum of 15 days.	
		credit counselin	d to receive a briefing about g because of:	L	credit counselin	d to receive a briefing about g because of:	
		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
		Active duty.	I am currently on active military duty in a military combat zone.		Active duty.	I am currently on active military duty in a military combat zone.	
			are not required to receive a edit counseling, you must file a			are not required to receive a edit counseling, you must file a	

motion for waiver of credit counseling with the court.

motion for waiver of credit counseling with the court.

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Debtor 1 Michael Scott Patter		rson	Case number (if known)					
P	art 6:	Answer These Q	uesti	ons for Reporting P	urpos	ses		
16.	What ki have?	nd of debts do you	16a.	•	idual pr	sumer debts? Consumer de imarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.	•	r invest	iness debts? Business debi ment or through the operation		debts that you incurred to obtain e business or investment.
			16c.	State the type of debts y	you owe	e that are not consumer or bu	sines	s debts.
17.	Are you Chapter	ı filing under r 7?	V	No. I am not filing unde	er Chap	ter 7. Go to line 18.		
	any exe exclude adminis are paid available	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?		· ·	•	•	•	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do imate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you e your assets to h?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you e your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Michael Scott Pat	terson	Case	number (if known)
Part 7:	Sign Below			
For you		I have examined this petition, a and correct.	and I declare under penal	ty of perjury that the information provided is true
				t I may proceed, if eligible, under Chapter 7, 11, 12, elief available under each chapter, and I choose to
				to pay someone who is not an attorney to help me ce required by 11 U.S.C. § 342(b).
		I request relief in accordance v	vith the chapter of title 11	, United States Code, specified in this petition.
		I understand making a false sta connection with a bankruptcy or or both. 18 U.S.C. §§ 152, 134	case can result in fines up	perty, or obtaining money or property by fraud in to \$250,000, or imprisonment for up to 20 years,
For VMV		Muchael Fa	Hesson 1	XSignature of Debtor 2
		Executed on MM / DD / YY		Executed on

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Debtor 1 Michael Scott P	atterson	Case number (if kn	own)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) pame eligibility to proceed under Chapter relief available under each chapter	7, 11, 12, or 13 of title 11, United 5	States Code, and have explained the
f you are not represented by an attorney, you do not need o file this page.	the debtor(s) the notice required by	11 U.S.C. § 342(b) and, in a case an inquiry that the information in	in which § 707(b)(4)(D) applies, the schedules filed with the petition
	Signature of Attorney for Debto	Da	MM / DD / YYYY
	Jeffrey J Hagen Printed name Law Offices Of Hagen & Ha Firm Name	gen	
	4559 San Blas Avenue Number Street		
	Woodland Hills	CA	91364
	City	State	ZIP Code
	Contact phone (818) 501-616	1 Email address jeffo	@hagenhagenlaw.com
	143754	CA	
	Bar number	State	

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

	against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)
	None
2.	(If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).) None
3.	(If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).) None
4.	(If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).) None
١d	eclare, under penalty of perjury, that the foregoing is true and correct.
Ex	ecuted at Woodland Hills , California Signature of Debtor
Da	ite: 04/19/2022 Signature of Joint Debtor
	Oignature of Joint Debtor

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

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Fill in this information to identify your case:						
Debtor 1	Michael First Name	Scott Middle Name	Patterson Last Name			
Debtor 2	riistivaille	Middle Name	Lastivaille			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: CENTRAL DIST. OF CALIFORNIA						
Case number						
(if known)						

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	Part 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$869,300.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$181,532.36
	1c. Copy line 63, Total of all property on Schedule A/B	\$1,050,832.36
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$138,217.47
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$5,784.30
	Your total liabilities	\$144,001.77
F	Part 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$12,461.85
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$8,687.46

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Debtor 1		Michael Scott Patterson	Case numbe	r (if known)	
P	art 4:	Answer These Questions for Administrative and Statistic	cal Record	ls	
6.	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?			
	ш.	No. You have nothing to report on this part of the form. Check this box and su	bmit this forn	n to the court with yo	ur other schedules.
7.	What	kind of debt do you have?			
	f	Your debts are primarily consumer debts. Consumer debts are those "incur amily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statis	tical purpose	es. 28 U.S.C. § 159.	•
	_	Your debts are not primarily consumer debts. You have nothing to report or his form to the court with your other schedules.	n this part of	the form. Check this	box and submit
8.		the Statement of Your Current Monthly Income: Copy your total current moal Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	onthly income	e from	\$17,899.31
9.	Сору	the following special categories of claims from Part 4, line 6 of Schedule	E/F:		
				Total claim	
	From	Part 4 on Schedule E/F, copy the following:			
	9a. E	Domestic support obligations. (Copy line 6a.)		\$0.0	0_
	9b. T	Taxes and certain other debts you owe the government. (Copy line 6b.)		\$0.0	<u>0</u>
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)		\$0.0	0
	9d. S	Student loans. (Copy line 6f.)		\$0.0	0_
		Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	port as	\$0.0	0
	9f. E	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h	.) +	\$0.0	<u>0</u>

9g. Total. Add lines 9a through 9f.

\$0.00

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Debtor 1	Michael	Scott	Patterson	_	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Bar	nkruptcy Court fo	r the: CENTRAL DIS	ST. OF CALIFORNIA	_	
Case number (if known)				_	t if this is an ded filing
Official Form	106A/B				
Schedule A/	B: Property	y			12/15
		· · · · · · · · · · · · · · · · · · ·		al Estate You Own or Have	e an Interest In
1. Do you own o	or have any lega	l or equitable interes	ing, Land, or Other Rea		e an Interest In
1. Do you own o	or have any lega o Part 2.	I or equitable interes	st in any residence, building		
1. Do you own o No. Go t Yes. Wh	or have any lega o Part 2. ere is the propert	I or equitable interesty?		, land, or similar property? Do not deduct secured cla amount of any secured cla	ims or exemptions. Put th nims on <i>Schedule D:</i>
1. Do you own o No. Go t Yes. Wh 1.1. 17740 Besseme	or have any lega o Part 2. ere is the propert	ty? What is t Check all Single	the property? I that apply. Ie-family home	Do not deduct secured cla amount of any secured cla Creditors Who Have Claim	ims or exemptions. Put th nims on <i>Schedule D:</i> ns Secured by Property.
1. Do you own o No. Go t Yes. Wh 1.1. 17740 Besseme California 91316	or have any lega o Part 2. ere is the propert	ty? What is t Check all	the property?	, land, or similar property? Do not deduct secured cla amount of any secured cla	ims or exemptions. Put th nims on <i>Schedule D:</i>
1. Do you own o No. Go t Yes. Wh 1.1. 17740 Besseme California 91316	or have any lega o Part 2. ere is the propert	ty? What is t Check all Singl Duple Conc	the property? I that apply. le-family home ex or multi-unit building dominium or cooperative ufactured or mobile home	Do not deduct secured cla amount of any secured cla Creditors Who Have Claim	ims or exemptions. Put th nims on Schedule D: ns Secured by Property. Current value of the
1. Do you own o No. Go t Yes. Wh 1.1. 17740 Besseme California 91316 Residence Los Angeles	or have any lega o Part 2. ere is the propert	ty? What is t Check all Singl Duple Conc Manu Land	the property? I that apply. Ile-family home ex or multi-unit building dominium or cooperative ufactured or mobile home Istment property eshare	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the entire property?	ims or exemptions. Put that ims on Schedule D: as Secured by Property. Current value of the portion you own? \$869,300.00 Dur ownership ple, tenancy by the
1. Do you own o No. Go t Yes. Wh 1.1. 17740 Besseme California 91316 Residence Los Angeles	or have any lega o Part 2. ere is the propert	ty? What is to Check all Single Conce Manue Land Investigation	the property? I that apply. Ide-family home ex or multi-unit building dominium or cooperative ufactured or mobile home I stment property eshare or	Do not deduct secured cla amount of any secured cla Creditors Who Have Claim Current value of the entire property? \$869,300.00 Describe the nature of your interest (such as fee sime entireties, or a life estate	ims or exemptions. Put the lims on Schedule D: as Secured by Property. Current value of the portion you own? \$869,300.00 Dur ownership ple, tenancy by the
1. Do you own o	or have any lega o Part 2. ere is the propert	what is to the condition of the conditio	the property? I that apply. Ide-family home ex or multi-unit building dominium or cooperative ufactured or mobile home I stment property eshare or an interest in the property? ne. or 1 only	Do not deduct secured cla amount of any secured cla Creditors Who Have Claim Current value of the entire property? \$869,300.00 Describe the nature of your interest (such as fee sime entireties, or a life estate) Fee Title Check if this is comme (see instructions)	ims or exemptions. Put that ims on Schedule D: as Secured by Property. Current value of the portion you own? \$869,300.00 our ownership ple, tenancy by the line of the portion you own.

Real property (including community property of nonfiling spouse Sara Wilhelmi): Residence, 17740 Bessemer Street, Encino, California 91316, 3 bedrooms, 1 bathroom, 1,123 square feet of living space, single family residence, acquired by quitclaim deed recorded 08/02/2019 from grandmother Molly Liebowitz, who subsequently passed away, worth an estimated \$869,300.00 per a zillow.com search done 04/19/2022, subject to hypothetical commissions and closing costs of 08.0% or \$69,544.00, tax liens in favor of the Internal Revenue Service recorded 09/10/2018 with balances estimated at \$40,000.00, a judicial lien originally in favor of West Valleyidence Opco, LLC, dba Providence West Valley against grandmother Molly Liebowitz and mother Arlene Patterson in the original amount of \$39,015.03, but assigned 04/14/2021 to Bryan S. Eikenberry and Kevin S. Eikenberry and now believed to have a balance of approximately \$60,000.00, and a homestead exemption of \$600,000.00, therefore net equity of \$99,756.00. Debtor Patterson proposes to pay the liens of both the Internal Revenue Service and the Eikenberrys in full with interest over the life of the Chapter 13 plan.

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drives. If you lease	e interest in any vehicles, whether they are a vehicle, also report it on Schedule G: Execute Executes, motorcycles		
drives. If you lease	a vehicle, also report it on Schedule G. Exe		
ota	Who has an interest in the property? Check one.	Do not deduct secured clair amount of any secured clair Creditors Who Have Claim	ms on <i>Schedule D:</i>
1	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
ng community ouse Sara Tacoma 4x4 4, 12,000 n favor of es requiring 757.21 per which 33 yout at end of maturity date in arrears, no	At least one of the debtors and anothe Check if this is community property (see instructions)	\$25,745.00	\$25,745.00
on 2 0000 ag community ouse Sara (B, 100,000 ed \$6,500.00 one on en in favor of dit Union with a 72.47 requiring	Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$6,500.00	ms on Schedule D:
	oma DBCB SR5 1 000 Ing community ouse Sara Tacoma 14x4 4, 12,000 In favor of es requiring 757.21 per which 33 yout at end of maturity date in arrears, no Incompany	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Deg community Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check if this is community property (see instructions) Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check if this is community property (see instructions)	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Do not deduct secured clair amount of any secured clair amount of any secured clair Creditors Who Have Claims Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Check if this is community property (see instructions)

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Deb	tor 1	Michael Scott Patterson Case number (if kn	own)
4.		raft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accesses: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accesses	
5.		e dollar value of the portion you own for all of your entries from Part 2, including any for pages you have attached for Part 2. Write that number here	→ \$32,245.00
P	art 3:	Describe Your Personal and Household Items	
Do	you own	or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware	
	_	B. Describe Household goods and furnishings (including community property of spouse Sara Wilhelmi): At residence (exempt).	of nonfiling \$2,000.00
7.			
	☐ No ✓ Yes	Electronics (including community property of nonfiling spouse Sar Wilhelmi): At residence (exempt).	a \$1,000.00
8.		ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art object stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	cts;
	□ No ✓ Yes	S. Describe Collectibles of value (including community property of nonfiling sp Wilhelmi): At residence, sports memorabilia (exempt).	ouse Sara \$200.00
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf club canoes and kayaks; carpentry tools; musical instruments	s, skis;
	□ No ✓ Yes	Equipment for sports and hobbies (including community property spouse Sara Wilhelmi): At residence, fishing gear (\$500.00, 15 bic (\$10,000.00), 8 skateboards (\$1,600.00).	
10.		n s les: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes	s. Describe	
11.	Clothes Exampl	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	ш	S. Describe Clothing (including community property of nonfiling spouse Sara V	Vilhelmi): \$500.00

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Deb	tor 1	Michael Sco	ott Pattersor	Case number (if known)	
12.	Jewelr Example	•	•	ne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	☐ No ✓ Yes	s. Describe		acluding community property of nonfiling spouse Sara Wilhelmi): ce, on person (exempt).	\$500.00
13.		rm animals les: Dogs, cats	s, birds, horses		
			1	animals (including community property of nonfiling spouse Sara At residence, three dogs.	\$0.00
14.	Any oth	-	nd househole	d items you did not already list, including any health aids you	
	Yes	s. Give specific ormation]
15.				entries from Part 3, including any entries for pages you have	\$16,300.00
	art 4:			ncial Assets	
	Cash			wallet, in your home, in a safe deposit box, and on hand when you file your	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No ✓ Yes	·		Cash:	\$100.00
17.		-	houses, and o	her financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	
	□ No ✓ Yes	S		Institution name:	
	17	.1. Checking	g account:	Deposits of money (including community property of nonfiling spouse Sara Wilhelmi): First Entertainment Credit Union, 'Value Checking,' account 289168-80, in both Debtor Patterson's and Sara Wilhelmi's names.	\$3,421.31
	17	7.2. Savings	account:	Deposits of money (including community property of nonfiling spouse Sara Wilhelmi): First Entertainment Credit Union, 'First500 Savings,' account 289168-00, in both Debtor	¢ 0 222 25
	17	.3. Savings	account:	Patterson's and Sara Wilhelmi's names. Deposits of money (including community property of nonfiling spouse Sara Wilhelmi): First Entertainment Credit Union, 'Secondary Savings,' account 289168-11, in both Debtor	\$8,322.25
				Patterson's and Sara Wilhelmi's names.	\$1,003.51

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Deb	tor 1 Michael Scott	Patterson	Case number (if known)	
18.	Bonds, mutual funds, o Examples: Bond funds,	•	ts h brokerage firms, money market accounts	
	<u> </u>	Institution or issuer	name:	
19.	Non-publicly traded sto an interest in an LLC, p		corporated and unincorporated businesses, including enture	
	No ☐ Yes. Give specific information about them	. Name of entity:	% of ownership:	
20.	Negotiable instruments in	nclude personal checks, <i>nt</i> s are those you canno	negotiable and non-negotiable instruments , cashiers' checks, promissory notes, and money orders. of transfer to someone by signing or delivering them.	
21.	Retirement or pension	accounts RA, ERISA, Keogh, 4010	(k), 403(b), thrift savings accounts, or other pension or	
	Yes. List each account separately.	Type of account:	Institution name:	
		Pension plan:	Retirement or pension accounts (including community property of nonfiling spouse Sara Wilhelmi): Motion Picture Health & Welfare Funds Individual Account Plan, \$107,140.29 (exempt).	\$107,140.29
		Retirement account:	Retirement or pension accounts (including community property of nonfiling spouse Sara Wilhelmi): Motion Picture Health & Welfare Funds Defined Benefit Plan. If Debtor Patterson were to retire today at age 50, he would be entitled at age 60 to a monthly benefit of \$2,194.01 until death (exempt).	\$0.00
22.		deposits you have mad	e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications	
	✓ No	In	stitution name or individual:	
23.	Annuities (A contract for		/ment of money to you, either for life or for a number of years)	
	✓ No Yes			
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 5		n a qualified ABLE program, or under a qualified state tuition progr	am.
	✓ No ☐ Yes	Institution name and	d description. Separately file the records of any interests. 11 U.S.C. §	521(c)
25.	Trusts, equitable or fut powers exercisable for		ty (other than anything listed in line 1), and rights or	
	☑ No			
	Yes. Give specific information about the	em		

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Deb	motor 1 Michael Scott Patterso	n Case number	r (if known)	
26.		trade secrets, and other intellectual property; websites, proceeds from royalties and licensing agreements]
27.	Licenses, franchises, and other g Examples: Building permits, excluse ✓ No ✓ Yes. Give specific information about them	eneral intangibles ive licenses, cooperative association holdings, liquor licenses	s, professional licer	nses
Mor	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	 No Yes. Give specific information about them, including whether you already filed the returns and the tax years 	Federal: Tax refunds owed to you (including commproperty of nonfiling spouse Sara Wilhelmi): Debte Patterson anticipates receiving a federal tax refund the Internal Revenue Service for the 2021 income to year of \$10,000.00, which would otherwise be applied taxes. Amt: \$10,000.00 State: Tax refunds owed to you (including commun property of nonfiling spouse Sara Wilhelmi): Debte Patterson anticipates receiving a state tax refund to the California Franchise Tax Board and the Georgi Department Of Revenue for the 2021 income tax you \$3,000.00, which would otherwise be applied to ba taxes. Amt: \$3,000.00	or d from tax Local: lied to nity or from a ear of	\$10,000.00 \$3,000.00 \$0.00
29.	Family support			
	No ☐ Yes. Give specific information	limony, spousal support, child support, maintenance, divorce	Alimony:	ty settlement
			Maintenance:	
			Support:	
			Divorce settlement	t:
			Property settlemen	nt:
30.		ou vinsurance payments, disability benefits, sick pay, vacation precurity benefits; unpaid loans you made to someone else	ay, workers'	
	✓ No✓ Yes. Give specific information]

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Deb	tor 1 Mich	ael Scott Patter	son	Case number (if known)	
31.	Examples: He	surance policies ealth, disability, or	life insurance; health savings account (HSA); o	credit, homeowner's, or renter's	s insurance
	company	ne the insurance of each policy	0	Danafisianu	Commanday on refund only a
	and list its	value	Company name:	Beneficiary:	Surrender or refund value:
			Interests in insurance policies (including community property of nonfiling spouse Sara Wilhelmi): Health, dental and vision insurance with Motion Picture Industry Pension & Health Plans, account M10553681, 'term' only, no value.	N/A	\$0.00
			Interests in insurance policies (including community property of nonfiling spouse Sara Wilhelmi): Homeowners insurance with Mercury Insurance Co., policy CAHP-		
			0001078395, 'term' only, no value.	N/A	\$0.00
			Interests in insurance policies (including community property of nonfiling spouse Sara Wilhelmi): Automobile insurance with Mercury Insurance Co., policy 0401-06-1401- 89312, 'term' only, no value.	N/A	\$0.00
32.	If you are the lentitled to rece	peneficiary of a liv	s due you from someone who has died ing trust, expect proceeds from a life insurance use someone has died	policy, or are currently	
	✓ No ☐ Yes. Give	specific informati	on		
33.	Examples: Ac	•	thether or not you have filed a lawsuit or ma ent disputes, insurance claims, or rights to sue	• •	
	✓ No ☐ Yes. Des	cribe each claim			
34.	Other conting	•	ated claims of every nature, including count	erclaims of the debtor and	
	✓ No ☐ Yes. Des	cribe each claim			
35.	Any financial	assets you did n	ot already list		
	☑ No	e specific informati			
		·			
36.		-	our entries from Part 4, including any entries number here		→ \$132,987.36
P	art 5: Desc	ribe Any Busi	ness-Related Property You Own or I	Have an Interest In. Lis	t any real estate in Part 1
37.	Do you own o	or have any legal	or equitable interest in any business-related	d property?	
	✓ No. Go to				

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Deb	tor 1	Michael Scott Patte	erson Case number (if known)
22				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.			nissions you already earned	
	✓ No ☐ Yes	s. Describe		
39.	Exampl	equipment, furnishings les: Business-related co desks, chairs, elect	omputers, software, modems, printers, copiers, fax machines, rugs, telephor	nes,
	✓ No ☐ Yes	s. Describe		
40.	Machin	ery, fixtures, equipme	nt, supplies you use in business, and tools of your trade	
	✓ No ☐ Yes	s. Describe		
41.	Invento	ory		
	✓ No ☐ Yes	s. Describe		
42.	Interes	ts in partnerships or jo	oint ventures	
	✓ No	s. Describe Name o	of entity: % of owner	ership:
43.	Custon	ner lists, mailing lists,	or other compilations	
	▼ No □ Yes	s. Do your lists include No Yes. Describe	e personally identifiable information (as defined in 11 U.S.C. § 101(41A))	?
44.	Any bu	siness-related propert	ty you did not already list	
	✓ No ☐ Yes	s. Give specific informa	ation.	
45.			your entries from Part 5, including any entries for pages you have It number here	→ \$0.00
Pa			m- and Commercial Fishing-Related Property You Own or an interest in farmland, list it in Part 1.	Have an Interest In.
46.	Do you	own or have any lega	l or equitable interest in any farm- or commercial fishing-related proper	ty?
		Go to Part 7. S. Go to line 47.		

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Deb	otor 1	Michael Scott Patterson	Case number (if known)	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a Examp	animals oles: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes]
10	_			
40.	Crops-	either growing or harvested		
	☐ Ye	es. Give specific ormation		
49.		and fishing equipment, implements, machinery, fix	xtures, and tools of trade	I
	☑ No □ Yes]
50		and fishing supplies, chemicals, and feed		
ου.	ram a ✓ No			
	Yes			
51.	Any fa	rm- and commercial fishing-related property you	did not already list	1
		es. Give specific]
52.	Add th	ormation ne dollar value of all of your entries from Part 6, in ed for Part 6. Write that number here		\$0.00
P		•	e an Interest in That You Did Not List Above	
		• •		
53.		u have other property of any kind you did not alre- oles: Season tickets, country club membership	ady list?	
	□ No ✓ Yes	os. Give specific information.		
	Aı	·	sted (including community property of nonfiling	\$0.00
	N ₀	· · · ·	ged spouse Sara Wilhelmi take the position that	•
	\$7	. 2013 Toyota Tacoma Prerunner Pickup 4x2 7,000.00, subject to lien with a payoff balanc eparation;		
	b.	eparation, . Transform To Perform Fitness LLC, formed . Those assets that Ms. Wilhelmi may have a		\$0.00
	<u></u>	Those assets that Ms. William may have t	acquired post 2010 separation.	
54.	Add th	ne dollar value of all of your entries from Part 7. V	Vrite that number here→	\$0.00

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Debtor 1	Michael Scott Patterson	Case number (if known)				
Part 8:	List the Totals of Each Part of this Form					
55. Part 1	: Total real estate, line 2			→		\$869,300.00
56. Part 2	: Total vehicles, line 5	\$32,245.00				
57. Part 3	: Total personal and household items, line 15	\$16,300.00				
58. Part 4	: Total financial assets, line 36	\$132,987.36				
59. Part 5	: Total business-related property, line 45	\$0.00				
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00				
61. Part 7	: Total other property not listed, line 54	+\$0.00				
62. Total	personal property. Add lines 56 through 61	\$181,532.36	Copy personal property total	→ +	-	\$181,532.36
63. Total	of all property on Schedule A/B. Add line 55 + line 62					\$1,050,832.36

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Fill in this inf	ormation to id	lentify your case	:	
Debtor 1	Michael	Scott	Patterson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for	the: CENTRAL DIS	T. OF CALIFORNIA	— Check if this
Case number				amended fili
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1 Identify the Propert	ty You Claim as Exem	p
-----------------------------	----------------------	---

1.	Which set of exemptions are you claiming? ✓ You are claiming state and federal nonban ✓ You are claiming federal exemptions. 11 U	kruptcy exemptions.	even if your spouse is filing 11 U.S.C. § 522(b)(3)	with you.			
2.							
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from	Chack only one boy for				

each exemption

3. Are you claiming a homestead exemption of more than \$189,050?

(Sul	bject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.
	No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
V	No
	Yes

Schedule A/B

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Debtor 1	Michael Scott Patterson	Case number (if known)					
Part 2:	Additional Page						
	iption of the property and line on l/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B		ck only one box for h exemption			
property of Wilhelmi): Street, End bedrooms of living spacquired to 08/02/2019 Liebowitz, away, wor a zillow.co subject to closing coliens in fax Service rebalances of judicial lie Valleyiden West Valle Liebowitz the original assigned (Eikenberry now believ approximal homestead therefore in Patterson both the Ir Eikenberry life of the fixed to the college of the fixed the college of		\$869,300.00		\$600,000.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.730		
Brief descrip	otion: d goods and furnishings	\$2,000.00		\$2,000.00 100% of fair market	C.C.P. § 704.020		
spouse Sa (exempt).	community property of nonfiling ara Wilhelmi): At residence chedule A/B: 6		_	value, up to any applicable statutory limit			
of nonfilin residence	s (including community property g spouse Sara Wilhelmi): At	\$1,000.00		\$1,000.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.020		

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Debtor 1 Michael Scott Patterson		Case number (if known)			
Part 2: Additional Page					
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B		eck only one box for h exemption		
Brief description: Collectibles of value (including community property of nonfiling spouse Sara Wilhelmi): At residence, sports memorabilia (exempt). Line from Schedule A/B: 8	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.040	
Brief description: Clothing (including community property of nonfiling spouse Sara Wilhelmi): At residence, on person (exempt). Line from Schedule A/B:1	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.020	
Brief description: Jewelry (including community property of nonfiling spouse Sara Wilhelmi): At residence, on person (exempt). Line from Schedule A/B:12	\$500.00		\$500.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.040	
Brief description: Retirement or pension accounts (including community property of nonfiling spouse Sara Wilhelmi): Motion Picture Health & Welfare Funds Defined Benefit Plan. If Debtor Patterson were to retire today at age 50, he would be entitled at age 60 to a monthly benefit of \$2,194.01 until death (exempt). Line from Schedule A/B:	\$0.00		\$0.00 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.110(d)	
Brief description: Retirement or pension accounts (including community property of nonfiling spouse Sara Wilhelmi): Motion Picture Health & Welfare Funds Individual Account Plan, \$107,140.29 (exempt).	\$107,140.29		\$107,140.29 100% of fair market value, up to any applicable statutory limit	C.C.P. § 704.110(d)	

Debtor 1	ormation to i	dentify your case Scott	Patterson			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	r the: CENTRAL DIS	ST. OF CALIFORNIA			
Case number					☐ Check if this is	s an
(if known)					amended filing	
Official Form	106D					
Schedule D:	Creditors	Who Have Cla	nims Secured b	y Property		12/15
On the top of any 1. Do any credit □ No. Che □ Yes. Fill Part 1: Lis 2. List all securclaim, list the creditor has a much as poss creditor's nam	additional pages fors have claims ck this box and s in all of the inform t All Secured ed claims. If a coreditor separate particular claim, ible, list the claim	s, write your name are secured by your property before the mation below. Claims reditor has more than ly for each claim. If mation below is in alphabetical order.	one secured ore than one in Part 2. As r according to the	wn).		
2.1		Describe the secures the	e property that claim:	\$60,000.00	\$869,300.00	
Bryan Eikenbern Creditor's name 1470 Maria Lane Number Street Unit 440		Residence	te you file, the claim is	s: Check all that apply.		
Walnut Creek	CA 94956					
City Who owes the del	State ZIP Code	☐ Disputed				
Debtor 1 only	or: Check one.		en. Check all that apply ement you made (such a		car loan)	
Debtor 2 only Debtor 1 and D	ebtor 2 only	☐ Statutory	/ lien (such as tax lien, r		,	
ш	the debtors and	another \Box	nt lien from a lawsuit cluding a right to offset)			
Check if this o		· ·	ent Lien			
Date debt was inc	urred <u>06/29/2</u>	021 Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$60,000.00

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Debtor 1 Michael Scott Patterson			Case number (if known)					
Additional Page Part 1: After listing any entries on this p sequentially from the previous page.			Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
Creditor's name POBox 60		t Union	Describe the property that secures the claim: 2012 Scion	\$12,472.47	\$6,500.00	\$5,972.47		
Debtor : Debtor : Debtor : Debtor : At least Check : to a cor	State Zil the debt? Check 1 only 2 only 1 and Debtor 2 only one of the debtors if this claim relate mmunity debt	y and another	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, musure) Judgment lien from a lawsuit Other (including a right to offset) Auto Lien	s mortgage or secured echanic's lien)	car loan)			
2.3	evenue Service	/2022	Last 4 digits of account number Describe the property that secures the claim: Residence	\$40,000.00	\$869,300.00			
Philadelph City Who owes Debtor Debtor At least Check	nia PA 19 State ZII the debt? Check 1 only	y s and another	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, many disputed) Judgment lien from a lawsuit Other (including a right to offset) Federal Income Taxes	mortgage or secured	car loan)			
Date debt v	vas incurred 20	10-2012	Last 4 digits of account number	3 2 4 6				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$52,472.47

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Debtor 1 Michael Scott Patterson		Case number (if known)			
Part 1: After listing	Additional Page Part 1: After listing any entries on this page, number them sequentially from the previous page.			Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.4 Describe the property that secures the claim: Toyota Financial Services Creditor's name POBox 4102 Number Street Describe the property that secures the claim: 2021 Toyota Tacoma DBCB SR5 PKP 4		\$25,745.00	\$25,745.00		
Carol Stream IL City Stat Who owes the debt? C ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor ☐ At least one of the de ☐ Check if this claim r to a community deb	heck one. 2 only ebtors and another	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) Auto Lease	mortgage or secured	car loan)	
Date debt was incurred	12/2020	Last 4 digits of account number	K 3 9 3		

Add the dollar value of your entries in Column A on this page. Write that number here:

•

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$25,745.00

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Debtor 1	Michael Scott Patterson			Case number (if known)	
Part 2:	List Others to Be Notified	l for a l	Debt That You /	Already Listed	
example, then list the	if a collection agency is trying to co he collection agency here. Similarly ditional creditors here. If you do no	ollect fro y, if you	m you for a debt yo have more than on	tcy for a debt that you already listed in Part 1. For ou owe to someone else, list the creditor in Part 1, and he creditor for any of the debts that you listed in Part 1, to be notified for any debts in Part 1, do not fill out or	
Na	ame Street			On which line in Part 1 did you enter the creditor? Last 4 digits of account number	
O Cit	gden	UT State	84201-0039 ZIP Code	- -	

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Fill in this info	rmation to id	entify your ca	ise:			
Debtor 1	Michael	Scott	Patterson			
F	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for	the: CENTRAL	DIST. OF CALIFORNIA			
Case number					Check if this	is an
(if known)]	amended filin	
Official Form	106E/F					
Schedule E/F	: Creditors	Who Have	Unsecured Claims			12/15
on Schedule A/B: P Do not include any If more space is nee to this page. On the	roperty (Official creditors with p eded, copy the F e top of any add	Form 106A/B) a artially secured Part you need, fil itional pages, wr	ncts or unexpired leases that coul nd on Schedule G: Executory Colciaims that are listed in Schedule I it out, number the entries in the ite your name and case number (ntracts and Unexpire D: Creditors Who F boxes on the left. A	ed Leases (Offic Hold Claims Sec	cial Form 106G). cured by Property.
		unsecured claim	is against you?			
✓ No. Go to	rait 2.					
claim. For each show both priori more space is n claim, list the ot	n claim listed, ide ty and nonpriority leeded for priority her creditors in F	ntify what type of y amounts. As money unsecured claim Part 3.	creditor has more than one priority u claim it is. If a claim has both priori uch as possible, list the claims in al is, fill out the Continuation Page of I	ity and nonpriority am phabetical order acco Part 1. If more than o	nounts, list that coording to the cree	laim here and ditor's name. If
(For an explana	tion of each type	of claim, see the	instructions for this form in the instr	ruction booklet. Total claim	Priority	Nonpriority
					amount	amount
2.1						
Priority Creditor's Name			Last 4 digits of account number			
Phoney Creditor's Name			When was the debt incurred?			
Number Street					_	
			As of the date you file, the claim Contingent	is: Check all that app	ply.	
			Unliquidated			
City	State 2	ZIP Code	Disputed			
Who incurred the de	ebt? Check or	ne.	Type of PRIORITY unsecured cla	im:		
Debtor 1 only	ebt? Check or	ne.	Type of PRIORITY unsecured cla Domestic support obligations	im:		
Debtor 1 only Debtor 2 only		ne.	Domestic support obligations Taxes and certain other debts	you owe the governm	nent	
Debtor 1 only Debtor 2 only Debtor 1 and De	btor 2 only		Domestic support obligations Taxes and certain other debts Claims for death or personal in	you owe the governm	nent	
Debtor 1 only Debtor 2 only Debtor 1 and De	btor 2 only ne debtors and ar	nother	Domestic support obligations Taxes and certain other debts	you owe the governm	nent	
Debtor 1 only Debtor 2 only Debtor 1 and De At least one of th	btor 2 only ne debtors and ar aim is for a com	nother	Domestic support obligations Taxes and certain other debts Claims for death or personal in intoxicated	you owe the governm	nent	

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Debtor 1	Michael Scott Patterson	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
4. List all	es I of your nonpriority unsecured claims editor has more than one nonpriority unse claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed luded in Part 1. If more than one creditor holds a particular claim, list the ot	•
Part 3.	If more space is needed for nonpriority	unsecured claims, fill out the Continuation Page of Part 2.	Total claim
Los Angel City Who incurr Debtor Debtor At least Check i	Street CA 90096-0001 State ZIP Code ed the debt? Check one. 1 only	Last 4 digits of account number	\$516.65
Salt Lake City Who incurr Debtor Debtor At least Check i	293 Street City UT 84131-1293 State ZIP Code ed the debt? Check one. 1 only	Last 4 digits of account number 9 8 1 9 When was the debt incurred? 09/2019-02/2022 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	\$8.13

Debtor 1 Michael Scott Patterson	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number ther previous page.	m sequentially from the	Total claim
4.3		\$2,600.00
First Entertainment Credit Union	Last 4 digits of account number x x x x	
Nonpriority Creditor's Name 6735 Forest Lawn	When was the debt incurred? 08/2021	
Number Street	As of the date you file, the claim is: Check all that apply.	
<u>Unit 313</u>	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Hollywood CA 90068 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Personal unsecured loan	
Is the claim subject to offset?	i diconal ancocal ca ican	
✓ No Yes		
4.4		\$646.35
First Entertainment Credit Union Visa Nonpriority Creditor's Name	_ Last 4 digits of account number 4 7 8 8	
POBox 60510	When was the debt incurred? 05/2018-04/2022	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
City Of Industry CA 91716-0510	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.5		\$1,064.16
GS Bank USA/Apple Card Nonpriority Creditor's Name	_ Last 4 digits of account number _ 0 _ 0 _ 0 _ 1	
POBox 7247	When was the debt incurred? <u>07/2021-04/2022</u>	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Dhiladalahia DA 40470	Disputed	
Philadelphia PA 19170 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Yes		
Yes		

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Debtor 1 Michael Scott Patterson	Case number (if known)	
Part 2: Your NONPRIORITY Unse	cured Claims Continuation Page	
After listing any entries on this page, number previous page.	them sequentially from the	Total claim
4.6		\$521.11
Providence Tarzana Regional Medical Ce Nonpriority Creditor's Name c/o AMCOL Systems, Inc. Number Street POBox 21625	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	
Columbia SC 29221-162 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community deb Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	
4.7		\$427.90
Synchrony Bank/Amazon Nonpriority Creditor's Name POBox 965013 Number Street	Last 4 digits of account number 5 8 1 4 When was the debt incurred? 10/2019-04/2022 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Orlando City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debts the claim subject to offset? ✓ No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	

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Debtor 1	Michael Scott Patte	erson	Case number (if known)	
Part 3:	List Others to B	e Notified Abo	t a Debt That You Already Listed	
For ex credit debts	xample, if a collection a tor in Parts 1 or 2, then	gency is trying to list the collection a 1 or 2, list the add	ied about your bankruptcy, for a debt that you already listed in Parts 1 of ollect from you for a debt you owe to someone else, list the original gency here. Similarly, if you have more than one creditor for any of the tional creditors here. If you do not have additional parties to be notified it this page.	
American Express			On which entry in Part 1 or Part 2 did you list the original creditor?	
Name POBox 29 Number	-		Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecutive Part 2: Creditors with Nonpriority Uns	
Fort Lauc	derdale FL State	33329 ZIP Code	Last 4 digits of account number	
First Ente	ertainment Credit Uni	ion	On which entry in Part 1 or Part 2 did you list the original creditor?	
Name 6735 Ford Number Unit 313	est Lawn Street		Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecutive Part 2: Creditors with Nonpriority Unsecutive Part 3: Creditors with Priority Unsecutive Part 3: Creditors with Part 3: Creditors	
Hollywoo	od CA State	90068 ZIP Code	Last 4 digits of account number	
Name Lockbox			On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecu	red Claims
Number POBox 72	Street 247		Part 2: Creditors with Nonpriority Uns	ecured Claims
Philadelp		19170-6112	Last 4 digits of account number	
City	State	ZIP Code		

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Debtor 1	Michael Scott Patterson	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
HOIII PAIL I	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. →	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2			6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts			\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$5,784.30
	6j.	Total. Add lines 6f through 6i.	6j.	\$5,784.30

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Fill in this in	formation to ic	entify your case:		
Debtor 1	Michael First Name	Scott Middle Name	Patterson Last Name	
Debtor 2				
(Spouse, if filing) First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for	the: CENTRAL DIST.	OF CALIFORNI	Α
Case number				
(if known)	-			Check if this is an amended filing
				amended ming
Official Form	n 106G			
Schedule G	: Executory	Contracts and	Unexpired I	Leases 1
☐ No. Che ☑ Yes. Fil List separate is for (for ex	eck this box and file Il in all of the inform ely each person o	ration below even if the correction below even if the correction states are company with whom you le lease, cell phone). So	with your other so contracts or leases you have the con	hedules. You have nothing else to report on this form. s are listed on <i>Schedule A/B: Property</i> (Official Form 106A/B). tract or lease. Then state what each contract or lease is for this form in the instruction booklet for more examples of
•	•	hom you have the cont	ract or lease	State what the contract or lease is for
		-	idot of lease	
2.1 Toyota Financial Services Name			2021 Toyota Tacoma Double Cab SR5 Pickup 4: Contract to be ASSUMED	
POBox 4 Number	4102 Street			-
	Street			_
Carol St	ream	IL	60197-4102	
City		State	ZIP Code	_

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Fill	l in this inf	formation to ider	ntify your ca	se:				
Deb	otor 1	Michael First Name	Scott Middle Name	Patt Last N	erson Name	-		
	otor 2 ouse, if filing)	First Name	Middle Name	Last I	Name	_		
Unit	ted States Ba	inkruptcy Court for the	: CENTRAL [DIST. OF CA	ALIFORNIA			
	se number					_		
	nown)						Check if this is an amended filing	
Offi	cial Form	106H						
Sch	nedule H	: Your Codeb	tors				1	2/15
1.					lo not list either sp		Answer every question. a codebtor.)	
	No. Go Yes. Did No Yes Ves In v	to line 3. d your spouse, former	spouse, or lega	al equivalent you live?		time?	Washington, and Wisconsin.) the name and current address of that person.	
		987 Campus Park	Drive					
	<u>Un</u>	it A						
	Mo City	orpark		CA State	93021 ZIP Code			
I	person show creditor on S	n in line 2 again as	a codebtor only Form 106D), So	y if that pers	on is a guarantor (Official Form 106	or cos	your spouse is filing with you. List the igner. Make sure you have listed the r Schedule G (Official Form 106G). Use	
	Column 1:	Your codebtor				Col	umn 2: The creditor to whom you owe the d	ebt
						Che	eck all schedules that apply:	
3.1	Sara Will	helmi				M	Schedule D, line 2.3	
	14987 Ca	ampus Park Drive					Schedule E/F, line	
	Number Unit A	Street					Schedule G, line	
	Moorpar	k	CA	930	21	_	ernal Revenue Service	
	City		State	7IP C				

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Fill in this infor	rmation to i	dentify your case:				
Debtor 1	Michael	Scott	Patter	son		
200001	First Name	Middle Name	Last Nar		Che	eck if this is:
Debtor 2	First Name	Middle No	l ant NI	ma	п	An amended filing
(Spouse, if filing)		Middle Name	Last Nar			A supplement showing postpetition
United States Bar	nkruptcy Court i	for the: CENTRAL D	IST. OF CALIF	ORNIA		chapter 13 income as of the following date:
Case number (if known)						MM / DD / YYYY
Official Form 1	1061					
Schedule I: Y	our Incon	ne				12/15
responsible for suplinclude information about your spouse. your name and case	plying correct about your sp If more space	information. If you are separ is needed, attach a se nown). Answer every c	e married and nated and and and and your separate sheet to	ot filing jo spouse is	ointly, and your not filing with y	I Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
Fill in your empinformation.	oloyment		Debtor 1			Debtor 2 or non-filing spouse
If you have more		Fundament status		۵.		
job, attach a sep with information		Employment status	✓ Employe ✓ Not employe			☐ Employed ☐ Not employed
additional emplo	oyers.	Occupation	Lead Man/A	•	ment	
Include part-time or self-employed		Employer's name	Entertainme Enterprises		ers	
Occupation may student or home applies.		Employer's address	235 Peachti Number Street Unit 217		t NE	Number Street
			Atlanta		GA 30303	City State 7in Code
			City		State Zip Code	City State Zip Code
		How long employed to	here? <u>10/1</u>	7/2021		
Part 2: Give	Details Abo	out Monthly Incom	е			
			n. If you have n	othing to re	eport for any line	, write \$0 in the space. Include your
non-filing spouse unle If you or your non-filir			er, combine the	informatio	n for all employe	rs for that person on the lines below. If
		arate sheet to this form.	•		, ,	·
				F -	For Debtor 1	For Debtor 2 or non-filing spouse
		nlary, and commissions monthly, calculate what		2. ge	\$17,899.31	
3. Estimate and li	st monthly ove	ertime pay.		3. +	\$0.00	
4. Calculate gross	s income. Add	d line 2 + line 3.		4.	\$17,899.31	

Official Form 106l Schedule I: Your Income page 1

Debt	otor 1 Michael Scott Patterson	Case number (if known)				
		ı	For Debtor 1	For Debto		
	Copy line 4 here	4 .	\$17,899.31			
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$5,288.70			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$0.00			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	<u>\$0.00</u>			
	5h. Other deductions. Specify: CA SDI	5h. +	\$148.76			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$5,437.46			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	. 7.	\$12,461.85			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00			
	8f. Other government assistance that you regularly receive					
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	 8g.	\$0.00			
	8h. Other monthly income.					
	Specify:	^{8h.} +	\$0.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	. 9.	\$0.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$12,461.85	+]=	\$12,461.85
11.	State all other regular contributions to the expenses that you list in	Schedul	e J.			
	Include contributions from an unmarried partner, members of your house friends or relatives.	ehold, yo	ur dependents, you	ır roommates	, and other	r
	Do not include any amounts already included in lines 2-10 or amounts the		. ,	expenses list		
	Specify:				11. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liabilities if it continues.				12.	\$12,461.85 Combined
13	if it applies. Do you expect an increase or decrease within the year after you file	this for	n?			monthly income
. ••	No. None.	33 1011				
	Yes. Explain:					

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F	ill in this inform	nation to ident	tify your case:			Cha	ck if this	io	
	Debtor 1	Michael	Scott	Patte	rson			ended filing	
		First Name	Middle Name	Last Na		╽	A supp	lement showing 13 expenses a	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ame		followin		is of the
	United States Bankr	uptcy Court for the	e: CENTRAL DIST	Γ. OF CAL	FORNIA		MM / D	D / YYYY	_
	Case number (if known)								
Of	fficial Form 10	6 <u>J</u>				-			
Sc	chedule J: Yo	ur Expense	es						12/15
cor	rrect information. If me and case number	more space is r	needed, attach anothouswer every question	er sheet to	ling together, both ar this form. On the top				
1.	Is this a joint case	e?							
2.	_ No	ebtor 2 live in a s	separate household? file Official Form 106J No		s for Separate Housel				
	Do not list Debtor	1 and	Yes. Fill out this int for each dependent		Dependent's relation Debtor 1 or Debtor		p to	Dependent's age	Does dependent live with you?
					Son			18	□ No - ☑ Yes
	Do not state the de names.	ependents			Daughter			15	□ No - ☑ Yes
									□ No
									- □ Yes □ No
									Yes
									□ No □ Yes
3.	Do your expenses expenses of peop yourself and your	ole other than	✓ No ☐ Yes						
Р	Part 2: Estima	ate Your Ongo	oing Monthly Exp	enses					
to ı		of a date after th	e bankruptcy is filed	-	are using this form as a supplemental Sche			-	
			sh government assis on Schedule I: Your II	-				Your expens	ses
4.			penses for your resided any rent for the ground				4	4	
	If not included in		3						
	4a. Real estate ta	axes					2	1a	\$797.75
	4b. Property, hom	neowner's, or rent	er's insurance				2	4b	\$72.00
	4c. Home mainte	nance, repair, and	d upkeep expenses				2	4c	\$140.00
	4d Homeowner's	association or co	andominium dues				,	1d	

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Debtor 1	Michael Scott Patterson	Case number (if known)			
		Your expens	ses		
5. Add	itional mortgage payments for your residence, such as home equity loans	5			
6. Utili	ties:				
6a.	Electricity, heat, natural gas	6a	\$350.00		
6b.	Water, sewer, garbage collection	6b			
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c	\$600.00		
6d.	Other. Specify:	6d			
7. Foo	d and housekeeping supplies	7.	\$1,200.00		
8. Chil	dcare and children's education costs	8.	\$175.00		
9. Clos	hing, laundry, and dry cleaning	9.	\$300.00		
10. Per	sonal care products and services	10.	\$100.00		
11. Med	lical and dental expenses	11.	\$25.00		
	nsportation. Include gas, maintenance, bus or train Do not include car payments.	12.	\$2,000.00		
	ertainment, clubs, recreation, newspapers, pazines, and books	13.	\$200.00		
-	ritable contributions and religious donations	14.			
15. Insu	irance. not include insurance deducted from your pay or included in lines 4 or 20.				
15a	Life insurance	15a			
15b	Health insurance	15b	\$170.00		
15c	Vehicle insurance	15c	\$365.50		
15d	Other insurance. Specify:	15d.			
16. Tax Spe	, , ,	16.			
17. Inst	allment or lease payments:				
17a	Car payments for Vehicle 1 Toyota Financial-2021 Tacoma	17a	\$757.21		
17b	Car payments for Vehicle 2 First Entertainment-2012 Scion xB	17b	\$235.00		
17c	Other. Specify:	17c			
17d	Other. Specify: Pet food and care / Work Tools	17d	\$1,200.00		
	r payments of alimony, maintenance, and support that you did not report as ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.			
	er payments you make to support others who do not live with you. cify:	19.			

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Deb	tor 1	Michael Scott Patterson	Case number (if knowr	n)
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	r. Specify:	21.	+
22.	Calcu	alate your monthly expenses.	_	
	22a.	Add lines 4 through 21.	22a.	\$8,687.46
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$8,687.46
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$12,461.85
	23b.	Copy your monthly expenses from line 22c above.	23b. -	\$8,687.46
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$3,774.39
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you fi	ile this form?	
		xample, do you expect to finish paying for your car loan within the year or do you ex ent to increase or decrease because of a modification to the terms of your mortgage	. ,	
	1	No.		
		Yes. Explain here: None.		
		Notice.		

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		500	Jament 1 age 42	. 01 00
Fill in this info	ormation to i	identify your case		
Debtor 1	Michael	Scott	Patterson	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bar	akruptov Court fo	or the CENTRAL DIS	T OF CALIFORNIA	
	ikrupicy Court it	or the: CENTRAL DIS	I. OF CALIFORNIA	
Case number (if known)				☐ Check if this is an
				amended filing
Official Form				
Declaration	About an I	ndividual Debt	or's Schedules	12/1
Sig	n Below		18 U.S.C. §§ 152, 1341, 151	
☐ Yes. Na	me of person _			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Wichael Sc	of perjury, I deect.	ttereon	X Signature of Debtor 2	les filed with this declaration and that they are
Date	/ DD / YYYY		Date	0/

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		dentify your case			
Debtor 1	Michael First Name	Scott Middle Name	Patterson Last Name	_	
Debtor 2 (Spouse, if	filing) First Name	Middle Name	Last Name	_	
United State	es Bankruptcy Court fo	or the: CENTRAL DIS	T. OF CALIFORNIA	_	
Case numb (if known)	er			Check if this is an amended filing	
Official F	orm 107				
		Affairs for Inc	lividuals Filing for	Rankruntov	04/22
Otatomo		7411411-0-1-01-11110	inviduale i illing iei	- Land aproy	V .,
correct infor	mation. If more space		separate sheet to this form	er, both are equally responsible for supplying n. On the top of any additional pages, write	
Part 1:	Give Details Ab	out Your Marital S	Status and Where You	Lived Before	
✓ Mar	your current marital ried married	status?			
☑ No	• ,		other than where you live r		
_					
(Commu	• •	•	• .	a community property state or territory? iisiana, Nevada, New Mexico, Puerto Rico, Texas,	

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Debtor 1 Michael Scott Patterson		Case nur	mber (if known)	
Part 2: Explain the Sources of	Your Income			
 Did you have any income from employ Fill in the total amount of income you red If you are filing a joint case and you have No ✓ Yes. Fill in the details. 	ceived from all jobs and all bu	isinesses, including par	t-time activities.	ellendar years?
_	Debtor 1		Debtor 2	
RIAINMENT PARTI	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
From January 1 of the current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$85,809.22	Wages, commissions, bonuses, tips	
	Operating a business		Operating a business	
For last calendar year:	Wages, commissions, bonuses, tips	\$180,977.48	Wages, commissions, bonuses, tips	
(January 1 to December 31, 2021)	Operating a business		Operating a business	
For the calendar year before that:	Wages, commissions, bonuses, tips	\$37.92	Wages, commissions, bonuses, tips	
January 1 to December 31, 2020)	Operating a business		Operating a business	
	Debtor 1		Debtor 2	
of + CREW	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
rom January 1 of the current year until he date you filed for bankruptcy:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	
	Operating a business		Operating a business	
For last calendar year:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	
January 1 to December 31, 2021)	Operating a business		Operating a business	
For the calendar year before that:	₩ Wages, commissions, bonuses, tips	\$95,785.07	Wages, commissions, bonuses, tips	
(January 1 to December 31, 2020)	Operating a business		Operating a business	

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Debtor 1 Michael Scott Patterson		Michael Scott Patterson		Case nu	mber (if known)			
5.	Include	bu receive any other income during income regardless of whether the bloyment; and other public benefit ambling and lottery winnings. If your 1.	at income is taxable. Exampl payments; pensions; rental in	es of other income are come; interest; dividen	alimony; child support; S ds; money collected from	lawsuits; royalties;		
	List ea	ch source and the gross income for	rom each source separately.	Do not include income	that you listed in line 4.			
	□ No ✓ Ye	os. Fill in the details.						
			Debtor 1		Debtor 2			
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions		
		ary 1 of the current year until u filed for bankruptcy:	Rental income	\$700.00 				
Ear	loot on	lendar year:	Tax Refund-2020-F	\$9,918.00				
		•	Tax Refund-2020-CA	\$2,351.00				
(Jai	nuary i	to December 31, 2021)	Tax Refund-2020-GA	\$475.00				
			Tax Refund-2020-MI	\$98.00				
			Rental income	\$500.00				
			Insurance proceeds	\$4,700.00				
			Sale of bicycles	\$1,200.00				
		endar year before that:	Rental income	\$700.00				
(Jar	nuary 11	to December 31, 2020)						

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Debtor 1 Michael Scott Patterson			Case number (if known)					
E	Part 3:	List Cert	tain Paym	ents You M	ade Before Y	ou Filed for Ba	nkruptcy	
6.	Are eith	er Debtor 1'	s or Debtor	2's debts prim	arily consumer	debts?		
	□ No.			-	-	ner debts. Consur		d in 11 U.S.C. § 101(8) as
		During the	90 days be	fore you filed fo	or bankruptcy, did	you pay any credit	or a total of \$7,575*	or more?
		□ No. G	o to line 7.					
		- t	otal amount	you paid that c	reditor. Do not in	clude payments for	nore in one or more produced to domestic support of attorney for this bank	oligations, such as
		* Subject	to adjustmer	nt on 4/01/25 ar	nd every 3 years a	after that for cases	filed on or after the o	date of adjustment.
	√ Yes	. Debtor 1	or Debtor 2	or both have p	rimarily consun	ner debts.		
	_	During the	90 days be	fore you filed fo	or bankruptcy, did	you pay any credit	or a total of \$600 or	more?
		□ No. G	o to line 7.					
			creditor. Do	not include pay	ments for domes		e and the total amou ons, such as child su case.	
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		ncial Servi	ices		_	\$3,028.84	\$25,745.00	_ Mortgage
	ditor's name Box 410				04/15/2022			☑ Car
_	mber Stre				— 03/15/2022			Credit card
					01/28/2022			Loan repayment
Ca	rol Strea	ım	IL	60197				☐ Suppliers or vendors ☐ Other
City			State	ZIP Code				
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		surance Co).		_	\$1,580.90	\$0.00	_ Mortgage
	ditor's name				03/24/2022			☐ Car
_	id electronser Street				— 02/24/2022			Credit card
IVUI	nibor Otro	501			01/25/2022			Loan repayment
					_			☐ Suppliers or vendors
<u>C:4.</u>			Ctoto	ZID Codo	<u> </u>			✓ Other Insurance
City	,		State	ZIP Code	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Lo	s Angele	s DWP				\$1,558.72	\$0.00	☐ Mortgage
	ditor's name				— 04/08/2022	· · · · · · · · · · · · · · · · · · ·		Car
	id electro				- 02/09/2022 - 02/09/2022			Credit card
Nur	mber Stre	еет						Loan repayment
_								Suppliers or vendors
								Other Utility
City	/		State	ZIP Code				

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Debtor 1		Michael Scott Patters	lichael Scott Patterson						Case number (if known)				
				Dates of payment	Total amou		Amount you	u \	Nas	this pay	ment f	or	
Spri	nt				\$2,136	5.51	\$0.00]		Mortgage			
Creditor's name Paid electronically Number Street			04/18/2022 — 03/14/2022 02/23/2022 — 01/24/2022					Car Credit card Loan repayment Suppliers or vendo			3		
City		State	ZIP Code					[✓	Other <u>Uti</u>	lity		
7.	Insider corpora agent, such a	1 year before you filed for include your relatives; an ations of which you are an cincluding one for a business child support and alimony as. List all payments to an i	y general partner officer, director, p s you operate as	s; relatives of a erson in contro	any general pol, or owner of	partners; f 20% or	partnerships more of thei	of which	ı yo seci	u are a ge urities; and	neral p	oartr nana	aging
I	benefi	1 year before you filed fo				s or trans	sfer any pro	perty on	ac	count of a	a debt	tha	İ
		e payments on debts guara	nteed or cosigned	a by an insider.	•								
	✓ No	s. List all payments that be	enefited an inside	r.									
Pa	rt 4:	Identify Legal Acti	ons, Reposse	essions, an	d Foreclos	sures							
	List all modific	1 year before you filed fo such matters, including per cations, and contract disput os. Fill in the details.	sonal injury case										stody
Case	title		Nature of the c	ase		Court or	r agency			5	Status	of t	he case
	a Wilho erson	elmi v. Michael	Complaiant T	o Dissolve N	Marriage	Court Nar	ne uth Victori	-		ourt	— —	~	Pending On appeal
Case	numb	er D391058											Concluded
						Ventura City	a	CA State)	93006 ZIP Code			
Case	title		Nature of the c	ase		Court or	r agency			,	Status	of t	he case
Moll Leib trust	y Leib ovitz, tee of	eyidence Opco, LLC v. povitz, aka Molly Rose individually and as the Leibovitz Living ed 2/1/93; Arlene	Complaint for a judgment, a against the p Patterson ow not a party to	nd now a lie roperty whic ns, although	en ch Debtor n he was	Court Nar	geles Cou ne ylmar Aver Street	•	eri	or Court	— — —		Pending On appeal Concluded
Patte trust Trus	erson tee of st Date	aka Arlene D. , individually and as the Leibovitz Living ed 2/1/93				Van Nu City	iys	CA State		91401 ZIP Code			
Case	numb	er I C106148											

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Deb	otor 1	Michael Scott Patterson		Case number (if kn	own)			
10.	seized,	1 year before you filed for bankrup or levied? all that apply and fill in the details be	otcy, was any of your property repo	ssessed, foreclosed	, garnished, attac	thed,		
		Go to line 11. S. Fill in the information below.						
11.		-	uptcy, did any creditor, including a make a payment because you owe		titution, set off a	ту		
	✓ No	s. Fill in the details.						
12.		1 year before you filed for bankru rs, a court-appointed receiver, a c	otcy, was any of your property in the ustodian, or another official?	e possession of an a	ssignee for the b	enefit of		
	☑ No □ Yes	3						
P	art 5:	List Certain Gifts and Cor	ntributions					
13.	Within	2 years before you filed for bankru	uptcy, did you give any gifts with a t	total value of more th	nan \$600 per pers	son?		
	☑ No □ Yes	s. Fill in the details for each gift.						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?							
	☑ No □ Yes	s. Fill in the details for each gift or co	ontribution.					
P	art 6:	List Certain Losses						
15.		1 year before you filed for bankru isaster, or gambling?	otcy or since you filed for bankrupto	cy, did you lose anyt	hing because of t	theft, fire,		
	□ No ☑ Yes	s. Fill in the details.						
	cribe the	e property you lost and how curred	Describe any insurance coverage Include the amount that insurance hinsurance claims on line 33 of Scheen	as paid. List pending		Value of property		
		amage arising from	Yes, insurance received		11/2021	\$4,700.00		

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Debtor 1 Michael Scott Patterson			Case number (if I	known)				
P	art 7:	List Ce	rtain Pa	ayments or	Transfers			
16.	anyone Include	you consu	ilted abo ys, bankr	ut seeking bar	ptcy, did you or anyone else actin nkruptcy or preparing a bankruptc preparers, or credit counseling agend	y petition?		•
Law Offices Of Hagen & Hagen Person Who Was Paid			n & Hag	gen	Description and value of any property transferred Cash/money/funds		Date payment or transfer was made	Amount of payment
455 Num		Blas Avenu eet	ie		-		04/18/2022	\$1,000.00
City jeff		Hills nhagenlaw te address	CA State	91364 ZIP Code	-			
	Within	-	re you fil	ed for bankru	- ptcy, did you or anyone else actin vith your creditors or to make pay			perty to
18.	✓ No ☐ Yes	s. Fill in the 2 years bef	details.	iled for bankr	you listed on line 16. uptcy, did you sell, trade, or other se of your business or financial a		operty to anyone, ot	her than
	Include	both outrigh	nt transfe	rs and transfers	s made as security (such as granting nave already listed on this statement	g of a security interest	or mortgage on your	property).
19.	Within	-	efore you		ruptcy, did you transfer any prope	erty to a self-settled t	rust or similar devic	e of which
	✓ No	a beneficion		nese are often	called asset-protection devices.)			

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Debtor 1	Michael Scott Patterson		Case number (if known)	
Part 8:	List Certain Financia	I Accounts, Instruments, Safe De	posit Boxes, and Storage Units	
benefi Include	t, closed, sold, moved, or tra e checking, savings, money ma	ankruptcy, were any financial accounts on sferred? arket, or other financial accounts; certificates, associations, and other financial institution	s of deposit; shares in banks, credit unions	-
✓ No	os. Fill in the details.			
-	u now have, or did you have burities, cash, or other valual	within 1 year before you filed for bankrup bles?	tcy, any safe deposit box or other depo	sitory
☑ No □ Ye	ss. Fill in the details.			
☑ No	es. Fill in the details.	nge unit or place other than your home w		tcy?
		u Hold or Control for Someone Els y that someone else owns? Include any		g for,
☐ No ☑ Ye	ss. Fill in the details.			
		Where is the property?	Describe the property	Value
Rick Bara Owner's Nam		_	Pinball machine	
Address L	Jnavailable	At residence		
	Chata ZID Code	Number Street		
City	State ZIP Code	City State ZIP Code Where is the property?	Describe the property	Value
Shamira S Owner's Nam		_	Personal possessions, home furnishings, clothing	
17740 Bes	ssemer Street	At residence		
Number St	reet	Number Street	Note: Debtor Patterson's girlfriend, Ms. Shirle, liveswith Debtor Patterson. Some	
Encino	CA 91316		of the personal possessions,	
City	State ZIP Code	City State ZIP Code	 home furnishings and clothing at the residence belong to her. 	

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Deb	otor 1	Michael Scott Patterson Case number (if known)
Р	art 10:	Give Details About Environmental Information
For	the purp	pose of Part 10, the following definitions apply:
	hazardoı	mental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of us or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, g statutes or regulations controlling the cleanup of these substances, wastes, or material.
		ins any location, facility, or property as defined under any environmental law, whether you now own, operate, or or used to own, operate, or utilize it, including disposal sites.
		us material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic ce, hazardous material, pollutant, contaminant, or similar item.
Rep	oort all n	otices, releases, and proceedings that you know about, regardless of when they occurred.
24.	Has an law?	y governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental
	✓ No □ Yes	s. Fill in the details.
25.		ou notified any governmental unit of any release of hazardous material?
	✓ No ☐ Yes	s. Fill in the details.
26.	Have you	ou been a party in any judicial or administrative proceeding under any environmental law? Include settlements and
	✓ No	s. Fill in the details.
Р	art 11:	Give Details About Your Business or Connections to Any Business
27.	Within busine	4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any ss?
		A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation
	_	None of the above applies. Go to Part 12. s. Check all that apply above and fill in the details below for each business.
28.		2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include ncial institutions, creditors, or other parties.
	☑ No □ Yes	s. Fill in the details below.

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Debtor 1	Michael Scott Patterson	Case number (if known)
Part 12	Sign Below	
that the an	swers are true and correct. I understand th	I Affairs and any attachments, and I declare under penalty of perjury nat making a false statement, concealing property, or obtaining money or se can result in fines up to \$250,000, or imprisonment for up to 20 years,
Michael	Scott Patterson, Debtor 1	Signature of Debtor 2
Date _		Date
Did you att	ach additional pages to Your Statement of	Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes	23.00	
Did you pa	y or agree to pay someone who is not an a	torney to help you fill out bankruptcy forms?
₩ No		
Yes. N	ame of person	Attach the Bankruptcy Petition Preparer's Notice,
		Declaration and Signature (Official Form 110)

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA SAN FERNANDO VALLEY DIVISION

In	re Michael Scott Patterson	Case No.	
		Chapter	13
	DISCLOSURE OF COMPENSATION OF A	ATTORNEY FOR	DEBTOR
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that that compensation paid to me within one year before the filing of the peti services rendered or to be rendered on behalf of the debtor(s) in contemis as follows:	ition in bankruptcy, or a	agreed to be paid to me, for
	For legal services, I have agreed to accept	\$5	5,000.00
	Prior to the filing of this statement I have received	\$1	1,000.00
	Balance Due	\$4	4,000.00
2.	. The source of the compensation paid to me was:		
	☑ Debtor ☐ Other (specify)		
3.	. The source of compensation to be paid to me is:		
	☐ Debtor ☐ Other (specify) Debtor Patterson via Chapter 1	13 Trustee per Chapt	er 13 plan
4.	I have not agreed to share the above-disclosed compensation with associates of my law firm.	any other person unle	ss they are members and
	☐ I have agreed to share the above-disclosed compensation with ano associates of my law firm. A copy of the agreement, together with a compensation, is attached.		
5.	. In return for the above-disclosed fee, I have agreed to render legal servi	ice for all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;	e debtor in determinin	g whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs	s and plan which may b	pe required;

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Date

Dat

4559 San Blas Avenue

Woodland Hills, California 91364

Phone: (818) 501-6161 / Fax: (818) 907-6722

Michael Scott Patterson

Case.	1.22-0K-104		cument Page 5	5 of 69
Fill in this i	nformation to	identify your case	e:	Check as directed in lines 17 and 21:
Debtor 1	Michael First Name	Scott Middle Name	Patterson Last Name	According to the calculations required by this Statement:
Debtor 2 (Spouse, if filin		Middle Name	Last Name	□ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). ☑ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
Case number (if known)		or the. CENTRAL DIS	ST. OF CALIFORNIA	☐ 3. The commitment period is 3 years. ☐ 4. The commitment period is 5 years.
	Statement	of Your Currei mmitment Peri	nt Monthly Incom	☐ Check if this is an amended filing P 10/1:
accurate. If mo information app	re space is neede blies. On the top o	d, attach a separate s	heet to this form. Include s, write your name and ca	ner, both are equally responsible for being the line number to which the additional use number (if known).
1. What is you	ur marital and filir	g status? Check one	only.	
☐ Not ma	arried. Fill out Col	umn A, lines 2-11.		
 Marrie	ed. Fill out both Co	lumns A and B, lines 2	-11.	
bankruptcy August 31. in the result	y case. 11 U.S.C. If the amount of your continuity of the control of the continuity of the control of the contr	§ 101(10A). For example, For ex	ple, if you are filing on Sepried during the 6 months, ace than once. For example,	red during the 6 full months before you file this tember 15, the 6-month period would be March 1 through did the income for all 6 months and divide the total by 6. Fill if both spouses own the same rental property, put the any line, write \$0 in the space.
				Column A Column B

		Debtor 1	Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$17,899.31	\$0.00
3.	Alimony and maintenance payments. Do not include payments from a spouse.	\$0.00	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	\$0.00	\$0.00

Net income from operating a business, profession, or farm

	Debtor 1	Debtor 2		
Gross receipts (before all deductions)	\$0.00	\$0.00	-	
Ordinary and necessary operating -	\$0.00	_ \$0.00	-	
expenses Net monthly income from a business, profession, or farm	\$0.00	\$0.00	Copy here → \$0.00	\$0.00

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Deb	otor 1	Michael Scott Pattersor	1		0	Case number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spous	e
6.	Net inc	come from rental and other i	real property					
	Gross deduct	receipts (before all	Debtor 1 \$0.00	Debtor 2 \$0.00				
		ry and necessary operating	\$0.00	\$0.00	Сору			
	Net mo	onthly income from rental or eal property	\$0.00	\$0.00	here →	\$0.00	\$0.00	
7.	Interes	st, dividends, and royalties				\$0.00	\$0.00	
8.	Unemp	oloyment compensation				\$0.00	\$0.00	
		enter the amount if you conte under the Social Security Act						
	For	you		\$0.	00			
	For	your spouse		\$0.	00			
	disabili uniform of title amoun	nce paid by the United States ity, combat-related injury or display a services. If you received 10, then include that pay only to fretired pay to which you wany provision of title 10 other that the services is the services of the services	sability, or death of any retired pay paid to extent that it doe ould otherwise be e	a member of the d under chapter 61 es not exceed the entitled if retired				
10.	amoun paymer interna or allow disabili uniform	e from all other sources not t. Do not include any benefits nts received as a victim of a v tional or domestic terrorism; of wance paid by the United State ity, combat-related injury or dis- ned services. If necessary, lise t the total below.	s received under the war crime, a crime a or compensation, pe es Government in c sability, or death of	e Social Security A against humanity, o ension, pay, annuit connection with a a member of the	ct; r			
	Total a	mounts from separate pages,	if any.		<u> </u>		+	
11.	Add lin	ate your total average montles 2 through 10 for each coluidd the total for Column A to the	mn.	В.		\$17,899.31	+ \$0.00	= \$17,899.31 Total average
P	art 2:	Determine How to M	leasure Your D	eductions fror	n Incom	е		monthly income
12.	Сору	our total average monthly in	ncome from line 1	1				\$17,899.31

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Deb	tor 1	Michael Scott Patterson Case number (if known)	
13.	Cald	culate the marital adjustment. Check one:	
		You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.	
		Total	\$0.00
14.	You	ur current monthly income. Subtract the total in line 13 from line 12.	\$17,899.31
15.		culate your current monthly income for the year. Follow these steps:	
	15a	Copy line 14 here 😝	\$17,899.31
		Multiply line 15a by 12 (the number of months in a year).	
	15b.	The result is your current monthly income for the year for this part of the form.	214,791.72
16.	Cald	culate the median family income that applies to you. Follow these steps:	
	16a	Fill in the state in which you live. California	
	16b	Fill in the number of people in your household.	
	16c.	Fill in the median family income for your state and size of household	\$97,092.00
17.	Hov	v do the lines compare?	
	17a.	Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, <i>Disposable income is not under 11 U.S.C.</i> § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 1). Use 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under 15b</i> .	22C-2).
		11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.	
Pa	art 3	Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)	
18.	Сор	by your total average monthly income from line 11.	\$17,899.31
19.	that	duct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's ome, copy the amount from line 13.	
	19a	. If the marital adjustment does not apply, fill in 0 on line 19a.	\$0.00
	19b.	Subtract line 19a from line 18.	\$17,899.31

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Debtor 1		Michael Scott Patterson	Case number (if known)		
20.	Calc	culate your current monthly income for the year. Follow these steps:			
	20a.	a. Copy line 19b		\$17	7,899.31
		Multiply by 12 (the number of months in a year).		X	12
	20b.	o. The result is your current monthly income for the year for this part of the form.		\$214	4,791.72
	20c.	c. Copy the median family income for your state and size of household from line	16c	\$97	7,092.00
21.	How	w do the lines compare?			
		Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top check box 3, <i>The commitment period is 3 years</i> . Go to Part 4.	o of page 1 of this form,		
	M	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the countries form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.	rt, on the top of page 1		
P	art 4	4: Sign Below			
	By s	signing here, under penalty of perjury I declare that the information on this statem	ent and in any attachments is true and c	orrect	
	x /	Michael Catterion x			
	" N	Michael Scott Patterson, Debtor 1 Signature	of Debtor 2		
	D	Date			
		MM / DD / YYYY	// DD / YYYY		

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

First Name Middle Name Last Name Debtor 2 Spouse, if filing) First Name Middle Name Last Name	First Name Middle Name Last Name Debtor 2	Fill in this inf	ormation to ic	dentify your case	:	
Debtor 2 Spouse, if filing) First Name Middle Name Last Name	Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: CENTRAL DIST. OF CALIFORNIA	Debtor 1				_
37	United States Bankruptcy Court for the: CENTRAL DIST. OF CALIFORNIA					_
		, ,				

Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/22

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,473.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age					
7a. Out-of-pocket health care allowance per person	\$68.00				
7b. Number of people who are under 65	x3	Сору			
7c. Subtotal. Multiply line 7a by line 7b.	\$204.00	here -	\$204.00		
People who are 65 years of age or older					
7d. Out-of-pocket health care allowance per person	\$142.00				
7e. Number of people who are 65 or older	x	Сору			
7f. Subtotal. Multiply line 7d by line 7e.	\$0.00	here -	+\$0.00	Сору	
7g. Total. Add lines 7c and 7f			\$204.00	here -	\$204.00

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Debt	or 1	Michael Sc	cott Patterson		Case number (if known)	
Loc	al Sta	andards	You must use the IRS Local Star	ndards to answer the quest	tions in lines 8-15.	
			rom the IRS, the U.S. Trustee Proes into two parts:	ogram has divided the IRS	S Local Standard for housing	
		-	s Insurance and operating expe s Mortgage or rent expenses	enses		
the	link s	-	ns in lines 8-9, use the U.S. Trustons in lines 8-9, use the U.S. Trustons for this force.	-		
8.		-	ies Insurance and operating expount listed for your county for insura	•		\$650.00
9.	Hou	sing and utiliti	ies Mortgage or rent expenses:			
	9a.	Ū	ber of people you entered in line 5, y for mortgage or rent expenses.	fill in the dollar amount lis	ted \$2,279.00	
	9b.	Total average your home.	monthly payment for all mortgages	and other debts secured b	ру	
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.					
		Name of the	creditor	Average monthly payment		
		Internal Rev	enue Service	\$666.67		
				+	Repeat this	
		9b. Total aver	rage monthly payment	\$666.67 Copy	→ - \$666.67 amount on line 33a.	
	9c.	Net mortgage	or rent expense.		Conv	
			b (total average monthly payment) If this number is less than \$0, ento		\$1,612.33 Copy here	\$1,612.33
10.	-		ne U.S. Trustee Program's division Iculation of your monthly expense		<u> </u>	
	Expl why:					
11.	Loc:	al transportation 0. Go to line 1 1. Go to line 1 2 or more. Go	4.	of vehicles for which you cla	aim an ownership or operating expense.	
12.			expense: Using the IRS Local States, fill in the Operating Costs that app			\$626.00

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or 1	Micha	JUJO 19k	atterson			Ca	ise numbe	er (iir known) _		
expe	ense for e	each vehic	le below. Yo	u may not claim th	Local Standards, cone expense if you do see for more than two	o not make				
Vehi	icle 1	Describe	∍ Vehicle 1:	2021 Toyota	Tacoma DBCB S	SR5 PKP 4	!			
13a.	. Ownersh	hip or leasi	ng costs usir	ng IRS Local Stand	dard			\$533.00		
13b.	. Average	monthly p	ayment for a	all debts secured b	y Vehicle 1.					
	Do not ir	nclude cos	ts for leased	vehicles.						
	amounts	s that are c	ontractually		and on line 13e, add ed creditor in the 60					
	Name	of each ci	reditor for V	ehicle 1	Average month payment	ly				
	Toyota	Financia	I Services		\$429.08 +					
						Сору		\$429.08	Repeat this amount on	
		Τι	otal average	monthly payment	\$429.08	here -	·	5429.00	line 33b.	
13c.		nicle 1 owne	ership or leas	se expense.	\$429.08 less than \$0, enter	•	·	\$103.92	Copy net Vehicle 1 expense here	\$103
		nicle 1 owne t line 13b fi	ership or leas	se expense.		•	·		Copy net Vehicle 1 expense	\$10 3
Vehi	Subtract	nicle 1 owne t line 13b fi Describe	ership or leas rom line 13a. e Vehicle 2:	se expense If this number is		\$0. <u></u>	L <u></u>		Copy net Vehicle 1 expense	\$10 3
Vehi	Subtract icle 2 . Ownersh . Average	nicle 1 owne t line 13b fi Describe hip or leasi	ership or leas rom line 13a. e Vehicle 2: ng costs usin	se expense. If this number is	less than \$0, enter	\$0.	L <u></u>	\$103.92	Copy net Vehicle 1 expense	\$103
Vehi	icle 2 Ownersh Average costs for	Describe Describe hip or leasi e monthly p	ership or leas rom line 13a. e Vehicle 2: ng costs usin	se expense. If this number is If this number is	less than \$0, enter	\$0t include	L <u></u>	\$103.92	Copy net Vehicle 1 expense	<u>\$103</u>
Vehi	icle 2 Ownersh Average costs for	Describe Describe hip or leasi e monthly preased ver	ership or lease rom line 13a. e Vehicle 2: ng costs usine payment for a sehicles.	se expense. If this number is If this number is	dardy Vehicle 2. Do no	\$0t include	L <u></u>	\$103.92	Copy net Vehicle 1 expense	<u>\$103</u>
13d. 13e.	Subtract icle 2 . Ownersh . Average costs for Name	Describe Describe hip or leasi e monthly present contents of each conten	ership or lease rom line 13a. e Vehicle 2: ng costs usine eayment for a sehicles. reditor for Vehicles.	se expense. If this number is any IRS Local Standall debts secured behicle 2 monthly payment se expense.	dard	\$0t include	L <u></u>	\$103.92 \$533.00	Copy net Vehicle 1 expense here	\$103 \$533

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Debto	Michael Scott Patterson	Case number (if known)				
15.	Additional public transportation expense: If you claimed 1 or more vehicalso deduct a public transportation expense, you may fill in what you believ not claim more than the IRS Local Standard for Public Transportation.	, , , , , , , , , , , , , , , , , , , ,	\$0.00			
Oth	er Necessary Expenses In addition to the expense deductions listed a following IRS categories.	above, you are allowed your monthly expense	es for the			
16.	Taxes: The total monthly amount that you actually pay for federal, state are employment taxes, Social Security taxes, and Medicare taxes. You may in your pay for these taxes. However, if you expect to receive a tax refund, you and subtract that number from the total monthly amount that is withheld to po not include real estate, sales, or use taxes.	clude the monthly amount withheld from ou must divide the expected refund by 12	\$5,437.46			
17.	Involuntary deductions: The total monthly payroll deductions that your jounion dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary	•	\$0.00			
18.	8. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.					
19.	Court-ordered payments: The total monthly amount that you pay as requagency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support		\$0.00			
20.	Education: The total monthly amount that you pay for education that is eitl ■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public e		\$0.00			
21.	Childcare: The total monthly amount that you pay for childcare, such as be Do not include payments for any elementary or secondary school education		\$0.00			
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.					
23.	 S. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. 					
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.		\$10,639.71			
Add	itional Expense Deductions These are additional deductions allowed Note: Do not include any expense allow	•				
25	Health insurance, disability insurance, and health savings account exp					
-0.	insurance, disability insurance, and health savings accounts that are reaso spouse, or your dependents.					
	Health insurance \$170.00					
	Disability insurance \$0.00					
	Health savings account +\$0.00					
	Total \$170.00 Copy	total here 👈	\$170.00			
	Do you actually spend this total amount?					
	No. How much do you actually spend? ✓ Yes					
26.	Continued contributions to the care of household or family members. will continue to pay for the reasonable and necessary care and support of a member of your household or member of your immediate family who is una expenses may include contributions to an account of a qualified ABLE programment.	n elderly, chronically ill, or disabled ble to pay for such expenses. These	\$0.00			

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Debto	Michael Scott Patterson	Case number (if known)		
27.	,	necessary monthly expenses that you incur to maintain the Prevention and Services Act or other federal laws that apply. es confidential.		\$0.00
28.	Additional home energy costs. Your home energy cost on line 8.	sts are included in your insurance and operating expenses		
	If you believe that you have home energy costs that are line 8, then fill in the excess amount of home energy costs	more than the home energy costs included in expenses on sts.		
	You must give your case trustee documentation of your amount claimed is reasonable and necessary.	actual expenses, and you must show that the additional		
29.		younger than 18. The monthly expenses (not more than dren who are younger than 18 years old to attend a private or	_	\$0.00
	You must give your case trustee documentation of your claimed is reasonable and necessary and not already as	actual expenses, and you must explain why the amount ccounted for in lines 6-23.		
	* Subject to adjustment on 4/01/25, and every 3 years a	fter that for cases begun on or after the date of adjustment.		
30.		amount by which your actual food and clothing expenses are in the IRS National Standards. That amount cannot be more National Standards.		
	To find a chart showing the maximum additional allowar instructions for this form. This chart may also be available.			
	You must show that the additional amount claimed is re-	asonable and necessary.		
31.	Continuing charitable contributions. The amount that instruments to a religious or charitable organization. 11	at you will continue to contribute in the form of cash or financial U.S.C. § 548(d)(3) and (4).	+_	\$0.00
	Do not include any amount more than 15% of your gross	s monthly income.		
32.	Add all of the additional expense deductions. Add lines 25 though 31			\$170.00

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Debtor	1	Michael Scott Pat	terson				Case no	umber (if known)		
Dedu	uction	s for Debt Payment								
	33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle									
		s, and other secured lculate the total avera	·	•		re contra	ctually du	e to each secured	d creditor in	
		months after you file		•		io ooniia	oldany da	o to caon occurre	a orealter in	
								erage monthly		
		Mortgages on your	home				ра	yment		
	33a.						-	\$666.67		
		Loans on your first	two vehicles							
	33b.	Copy line 13b here					→	\$429.08		
	33c.	Copy line 13e here					→	\$0.00		
	33d.	List other secured de				_				
		e of each creditor for secured debt		Identify property t secures the debt	hat	Does pa	ayment taxes or			
						insuran	ice?			
	Brya	n Eikenberry & Ke	vin Eikenbe	Residence		<u> </u>		\$1,000.00		
							Yes No	•		
•	First	Entertainment Cre	edit Union	2012 Scion		$ \square$		\$207.87		
							No +			
•							Yes		Commitatel	
	33e.	Total average month	ly payment. A	dd lines 33a throug	jh 33d			\$2,303.62	Copy total here	\$2,303.62
		ny debts that you lis ssary for your suppo				sidence,	a vehicle	, or other proper	ty	
			it of the supp	ort or your dopon	ucino.					
	ш	No. Go to line 35. Yes. State any amou	int that you mu	st pay to a creditor.	, in additior	n to the p	ayments I	isted in line 33, to	keep	
				called the cure amo						
Nam	e of tl	he creditor	Identify prop		Total cur	е		Monthly cure amount		
Into	rnal E	Revenue Service	Residence		\$40,00	n nn -	÷ 60 =	\$666.67		
IIILEI	illai i	Veveriue Service	Nesidefice		- φ40,00	0.00	. 00 –	φοσο.στ		
						÷	: 60 =			
						÷	÷ 60 = +			
							Total	\$666.67	Copy total here	\$666.67
35.	Do vo	ou owe any priority c	laimssuch a	s a priority tax. ch	ild suppo	rt. or			-	
	alimo	onythat are past due S.C. § 507.								
		No. Go to line 36.								
	Ū `			f these priority clain						
				riority claims					÷ 60 =	\$0.00
		i otai ailioulit Ol	un past-uue p	nonty damis					. 55 –	Ψυ.υυ

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Debto	Michael Scott Patterson	Case number (if known)	
36.	Projected monthly Chapter 13 plan payment	\$2,444.91	
	Current multiplier for your district as stated on the list issued by the Adminis Office of the United States Courts (for districts in Alabama and North Caroliby the Executive Office for United States Trustees (for all other districts).		
	To find a list of district multipliers that includes your district, go online using specified in the separate instructions for this form. This list may also be avait the bankruptcy clerk's office.		
	Average monthly administrative expense	\$224.93 Copy total here	\$224.93
37.	Add all of the deductions for debt payment. Add lines 33e through 36.		\$3,195.22
Tota	al Deductions from Income		
38.	Add all of the allowed deductions.		
	Copy line 24, All of the expenses allowed under IRS expense allowances	<u>\$10,639.71</u>	
	Copy line 32, All of the additional expense deductions	\$170.00	
	Copy line 37, All of the deductions for debt payment		
	Total deductions	\$14,004.93 Copy total here →	\$14,004.93
	rt 2: Determine Your Disposable Income Under 11 U.S.C		
39.	Copy your total current monthly income from line 14 of Form 122C-1, C Statement of Your Current Monthly Income and Calculation of Committee		\$17,899.31
40.	Fill in any reasonably necessary income you receive for support for de. The monthly average of any child support payments, foster care payments, disability payments for a dependent child, reported in Part 1 of Form 122C-you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.	or 1, that	
41.	Fill in all qualified retirement deductions. The monthly total of all amour your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of from retirement plans, as specified in 11 U.S.C. § 362(b)(19).		
42.	Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here	\$14,004.93	
43.	Deduction for special circumstances. If special circumstances justify and expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a deta explanation of the special circumstances and documentation for the expenses.	ailed	
	Describe the special circumstances Amount of expen	se	
		_	
		-	
	++	_ - -	
	Total\$0.00	Copy here → + \$0.00	

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44. Total adjustments. Add lines 40 through 43	\$14,004.93
45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.	
	\$3,894.38
Part 3: Change in Income or Expenses	
46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or a virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.	
Form Line Reason for change Date of change Increase or Amoundecrease?	nt of change
□ 122C-1 □ Increase	
122C-2 Decrease	
☐ 122C-1 ☐ Increase	
122C-2 Decrease	
122C-1 Increase	
122C-2 Decrease	
☐ 122C-1 ☐ Increase ☐ Decrease ☐	
Decrease Decrease	
Part 4: Sign Below	
By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and Michael Scott Patterson, Debtor 1 **Signature of Debtor 2**	correct.
Date Date	

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Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Law Offices Of Hagen & Hagen Jeffrey J Hagen - SBN 143754 (818) 501-6161 4559 San Blas Avenue Woodland Hills, California 91364 Fax: (818) 907-6722 jeff@hagenhagenlaw.com	FOR COURT USE ONLY
☐ Debtor(s) appearing without attorney Attorney for Debtor	
	ANKRUPTCY COURT LIFORNIA - SAN FERNANDO VALLEY DIVISION
In re:	CASE NO.: CHAPTER: 13
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS
	[LBR 1007-1(a)]
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Depenalty of perjury that the master mailing list of cre sheet(s) is complete, correct, and consistent responsibility for errors and omissions.	btor's attorney if applicable, certifies under editors filed in this bankruptcy case, consisting of with the Debtor's schedules and I/we assume all

American Express
Box 0001
Los Angeles, CA 90096-0001

American Express POBox 297871 Fort Lauderdale, FL 33329

Bryan Eikenberry & Kevin Eikenberry 1470 Maria Lane Unit 440 Walnut Creek, CA 94956

Capital One Bank USA POBox 31293 Salt Lake City, UT 84131-1293

First Entertainment Credit Union POBox 60510 City Of Industry, CA 91716-0510

First Entertainment Credit Union 6735 Forest Lawn Unit 313 Hollywood, CA 90068

First Entertainment Credit Union Visa POBox 60510 City Of Industry, CA 91716-0510

Goldman Sachs Bank USA Lockbox 6112 POBox 7247 Philadelphia, PA 19170-6112

GS Bank USA/Apple Card POBox 7247 Philadelphia, PA 19170

Internal Revenue Service POBox 7346 Philadelphia, PA 19101-7346

Internal Revenue Service Ogden, UT 84201-0039

Jeffrey J Hagen 4559 San Blas Avenue Woodland Hills, California 91364

Providence Tarzana Regional Medical Cent c/o AMCOL Systems, Inc. POBox 21625 Columbia, SC 29221-1625

Sara Wilhelmi 14987 Campus Park Drive Unit A Moorpark, CA 93021

Synchrony Bank/Amazon POBox 965013 Orlando, FL 32896-5013

Toyota Financial Services POBox 4102 Carol Stream, IL 60197-4102